Application for Employment

Air-Land Transport Service, Inc.

1020 W. Birchwood Morton, IL 61550 (309) 263-7084 x113

PLEASE PRINT

Equal access to programs, services and employment is available to all persons. Those applicants requiring reasonable accommodation to the application and/or interview process should notify a representative of the Human Resources Department.

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Referral Source	☐ Advertisement	Employee Relative		
	□ Walk-in	□ Private Employment Agenc		
	Name of source (if ap	plicable)		
Name	LAST	FIDOT		
Address		FIRST	Social Security	MIDDLE
Telephone # (STREET) Mobile	CITY STATE 2 /Beeper/Other Phone # ()	E-mail Address	
If necessary, best ti	ime to call you at home is	s		AM PM
May we contact yo	u at work?			. Yes No
If yes, work number	er and best time to call		()	AM PM
			·	
If no, please explai	n			
Have you submitte	d an application here bef	ore?		🗆 Yes 🗖 No
If yes, give date(s)	and position(s)			/ /
Have you ever been	n employed here before?			Yes No
If yes, give dates			From <u>/ /</u> T	°o <u>/ /</u>
Are you legally eli	gible for employment in	his country?		Yes No
Date available for	work/	/ What is your desired sala	ry range?	<u>\$</u>
Type of employme	nt desired	Time □Part-Time □Ter	mporary 🗆 Seasonal 🛛 Edu	cational Co-Op
Will you relocate i	f job requires it?	Yes No Will you t	ravel if job requires it?	Yes No
Are you able to me	et the attendance require	ments of the position?		Yes 🗌 No
Will you work ove	rtime if required?			🗌 Yes 🗌 No
If no, please explai	n			
Have you ever been	n bonded?			Yes 🗌 No
Have you ever plea	l "guilty" or "no contest"	to, or been convicted of a crime?		\Box Yes \Box No
ANSWERING "YES" TO THESE Q	de date(s) and details UESTIONS DOES NOT CONSTITUTE AN AUT LAPPLIED FOR WILL BE TAKEN INTO ACCOL	OMATIC BAR TO EMPLOYMENT. FACTORS SUCH AS DATE OF NT.	THE OFFENSE, SERIOUSNESS AND NATURE OF THE VIOLATION	l,

Driver's license number if driving is an essential job function

AN EQUAL OPPORTUNITY EMPLOYER

State _

Employment History

Provide the following information of your past and current employers, assignments or volunteer activities, starting with the most recent (use additional sheets if necessary). Explain any gaps in employment in comments section below.

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Comments Including EXPLANATION OF ANY GAPS IN EMPLOYMENT

Skills and Qualifications

Summarize any special training, skills, licenses and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying.

Educational Background (if job related)

A. List last three (3) schools attended, starting with most recent. B. List number of years completed. C. Indicate degree or diploma earned, if any. D. Grade Point Average or Class Rank. E. Major field of study. F. Minor field of study (if applicable).

A. SCHOOL	NUMBER OF YEARS COMPLETED	C. DEGREE DIPLOMA	CLASS RANK	E. MAJOR	F. MINOR

References

List name and telephone number of three business/work references who are NOT related to you and are NOT previous supervisors. If not applicable, list three school or personal references who are not related to you.

TELEPHONE NUMBER OF YEARS KNOW

Additional Information

List professional, trade, business or civic associations and any offices held. Exclude memberships that would reveal race color religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

ORGANIZATION	OFFICES HELD

List special accomplishments, publications, awards, etc. Exclude memberships that would reveal race color religion, sex, national origin, citizenship, age, mental or physical disabilities, veteran/reserve national guard or any other similarly protected status.

List any additional information you would like us to consider.

Applicant Statement

I certify that all information I have provided in order to apply for and secure work with the employer is true, complete and correct.

I understand that any information provided by me that is found to be false, incomplete or misrepresented in any respect, will be sufficient cause to (i) cancel further consideration of this application, or (ii) immediately discharge me from the employer's service, whenever it is discovered.

I expressly authorize, without reservation, the employer, its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me in this application, resume or job interview. I hereby waive any and all rights and claims I may have regarding the employer, its agents, employees or representatives, for seeking, gathering and using such information in the employment process and all other persons, corporations or organizations for furnishing such information about me.

I understand that the employer does not unlawfully discriminate in employment and no question on this application is used for the purpose of limiting or excusing any applicant from consideration for employment on a basis prohibited by applicable local, state or federal law.

I understand that this application remains current for only 365 days. At the conclusion of that time, if I have not heard from the employer and still wish to be considered for employment, it will be necessary to reapply and fill out a new application.

If I am hired, I understand that I am free to resign at any time, with or without cause and without prior notice, and the employer reserves the same right to terminate my employment at any time, with or without cause and without prior notice, except as may be required by law. This application does not constitute an agreement or contract for employment for any specified period or definite duration. I understand that no supervisor or representative of the employer is authorized to make any assurances to the contrary and that no implied oral or written agreements contrary to the foregoing express language are valid unless they are in writing and signed by the employer's president.

I also understand that if I am hired, I will be required to provide proof of identity and legal authority to work in the United States and that federal immigration laws require me to complete an 1-9 Form in this regard.

DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT.

I certify that I have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant____